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23394 7590 03/29/2005

ROBROY R FAWCETT
1576 KATELLA WAY
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04/22/2005 HABDEL3 00000053 09929516

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Robroy R. Fawcett

(Depositor's name)

[Signature]
April 19, 2005

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
Q. 09/929,516	08/13/2001	Frank Paetzold	EYEM1340	8236

TITLE OF INVENTION: METHOD AND SYSTEM FOR GENERATING FACIAL ANIMATION VALUES BASED ON A COMBINATION OF VISUAL AND AUDIC INFORMATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES NO	\$700 \$1400	\$300	\$1000 \$1700	06/29/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
CAO, HUEDUNG X	2821	345-473000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Robroy R. Fawcett

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Nevenengineering, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Santa Monica, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
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- ☒ A check in the amount of the fee(s) is enclosed. (Check # 1560 for \$1,700.)
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☒ The Director is hereby authorized by charge ^{any} ~~the~~ required fee(s), or credit any overpayment, to Deposit Account Number 50-1138 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☒ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Robroy R. Fawcett

Date April 19, 2005

Typed or printed name

Registration No. 35,133

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